

ENVIRONMENTAL PROTECTION AGENCY
Technical Enforcement Support at Hazardous Waste Sites

APPROPRIATION <input checked="" type="checkbox"/> CERCLA <input type="checkbox"/> RCRA <input type="checkbox"/> Other Funding Acct No _____		TES NO _____ Contract No <u>6E-0--7037</u> Prime Contractor Name <u>PF</u>	WORK ASSIGNMENT NO <u>4446 669</u> <input type="checkbox"/> Original <input type="checkbox"/> Amendment No _____ Priority <input type="checkbox"/> Normal <input type="checkbox"/> Expedite <input type="checkbox"/> Emergency
SITE/FACILITY <u>1aenn</u> or Project Name _____ NPL Site <input type="checkbox"/> Final or Proposed List <input checked="" type="checkbox"/> No RCRA Facility <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Facility ID# _____		Site/Facility Location (City or County) _____ State _____ Region/HQ _____ Site Acct # <u>717E</u> SCAP Activity Link _____	
PURPOSE <input checked="" type="checkbox"/> Initiate New Work Assignment <input type="checkbox"/> Work Plan Approval <input type="checkbox"/> Disapprove Work Plan (Contractor will immediately stop work) <input type="checkbox"/> Work Plan Revision (<input type="checkbox"/> SOW <input type="checkbox"/> Cost/Hours) <input type="checkbox"/> Closeout Work Assignment (All final deliverables received)			
STATEMENT OF WORK SUMMARY (SOW) (Attach a <u>Detailed</u> SOW) (See Reporting Requirements) Task Type <u>Site Investigation</u> Task No _____ (Must identify task type and number according to TES User's Guide to show activity is within the overall TES contract SOW) Summary/Comments _____			
BASE PERIOD Previously Approved _____ This Action _____ Total _____		OPTION PERIOD (Authorized only if contract option is exercised) Previously Approved _____ This Action _____ Total <u>3500</u>	
PERIOD OF PERFORMANCE From _____ To _____ (closeout date not to exceed September 30 1987)		PERIOD OF PERFORMANCE From <u>7/7/87</u> To _____ (Closeout date)	
(Do not include clerical or Expert Witness hours in the LOE estimate. Expert Witness costs are considered "Other Direct Costs." Estimate the Expert Witness hours in the attached Scope of Work.)			
No. of Pages to Follow _____ (Including SOW)		Reference Info <input type="checkbox"/> Attached <input type="checkbox"/> Transmitted Separately <input type="checkbox"/> Pickup From _____	
REPORTING REQUIREMENTS <input type="checkbox"/> Briefing(s) <input type="checkbox"/> Letter Report <input type="checkbox"/> Draft Report <input type="checkbox"/> Final Report <input type="checkbox"/> Other _____ Deliverables are to be marked ENFORCEMENT CONFIDENTIAL <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Reporting requirements and deliverables may differ for each TES contract. Include in the SOW a schedule for deliverables. If the number of reports required for your deliverables differs from the contract's normal requirement, request that in your SOW.			
INITIATOR <u>CIC 47</u> Primary Contact <u>Deane Dunn</u> Address _____ Phone no _____		<u>7/7/87</u> Date FTS _____ Off NET _____	
CONCURRENCE <u>2101</u> Regional Contact _____ Date _____			
APPROVAL <u>[Signature]</u> Project Officer (HQ TESPO) <u>[Signature]</u> Contracting Officer		<u>7/24/87</u> Date <u>7/11/87</u> Date (Effective Date)	
CONTRACTOR ACKNOWLEDGEMENT OF RECEIPT <u>[Signature]</u> Signature and Title		<u>7/20/87</u> Date	
Justification required in comment section Required within 45 days of effective date or work stops 30 day minimum required between draft and final report			

*Technical
(continuation from
WA 479 - base period)
(Bolder)*



RECEIVED

JUL 28 1987

CMPL SECTION